



**Birla
Fertility
& IVF**

**Organization mentor : Davinder Rawat
Centre : Birla Fertility and IVF, Bhubaneswar**

Submitted by : Dr. Ankita Sharma



ABOUT THE ORGANIZATION

- Birla Fertility & IVF
is part of the C.K. Birla Group, which has 50+ years of excellence in healthcare and a more than 150-year legacy of trust and reliability.
- One-stop shop for comprehensive fertility services delivered with empathetic care, providing world-class fertility treatments at fertility clinics using cutting-edge medical technology and equipment.
- Aim to deliver compassionate, comprehensive fertility care with a high success rate, clinical reliability and transparent pricing.



Optimizing the flow of patients and reducing their waiting time in OPD.

- To understand the patients' journey in the center and to recognize the areas where there is a delay or waiting beyond the benchmarked TAT.
- RCA and CAPA is done to understand the detailed reasons of delay and to correct the process.
- To optimize and channelize their flow.
- This will help to reduce the waiting time and lead to patient satisfaction.



OBJECTIVE :

- To determine the areas where the waiting is more than the benchmark time.
- To identify the reasons for delay of processes.

PROCESS AND STEPS TO COMPLETE DISSERTATION :

- Patient data was gathered through systematic observation, encompassing interactions with staff members including those from General Reception (GRE), Security, and Nursing departments.
- Observational study (cross sectional)
- Simple random sampling.

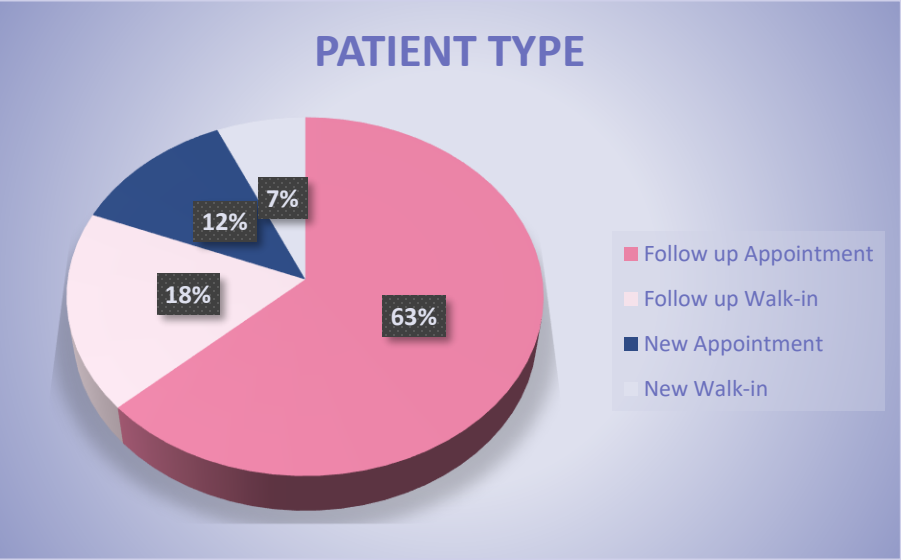


STUDY POPULATION :

- Inclusion criteria : All new patients – appointment taken, walk in.
All follow up patients – appointment taken, walk in.
 - Exclusion criteria : Donors, patients coming for treatment apart from IVF.
-
- ❑ Sample size = 106



FINDINGS AND CONCLUSION :



Percentage of appointment patients	
Total Appoint patients	80
Total sample size	106
Percentage	75%

Patient type wise TAT			
		Values	
PATIENT TYPE	Appointment taken	Count of PATIENT TYPE	Average of TAT2
Follow up	Appointment	67	01:22
	Walk-in	19	01:13
New	Appointment	13	01:07
	Walk-in	7	01:50
Grand Total		106	01:21



FINDINGS AND CONCLUSION :

- Defined TAT for new patient = 90 mins
(15 mins. for registration + 45 mins. of consultation + 30 mins for TVS)
- Defined TAT for TVS = 30 mins.

TVS TAT	
Row Labels	Average of Final TAT
TVS	1:26
Grand Total	1:26

Inference : Average time taken for a patient coming just for TVS = 86 mins.

**PATIENT TRAVELS
FROM A LONG
DISTANCE**

**DOCTOR
UNAVAILABILITY**

Reasons for the delay beyond
– 90 mins for new patient
- 30 mins for TVS patients

Avoids following the time given.

Working patients prefer to come
before noon.

Arriving late

One consultant in OT till surgeries get over

Delayed
patient
waiting
time.

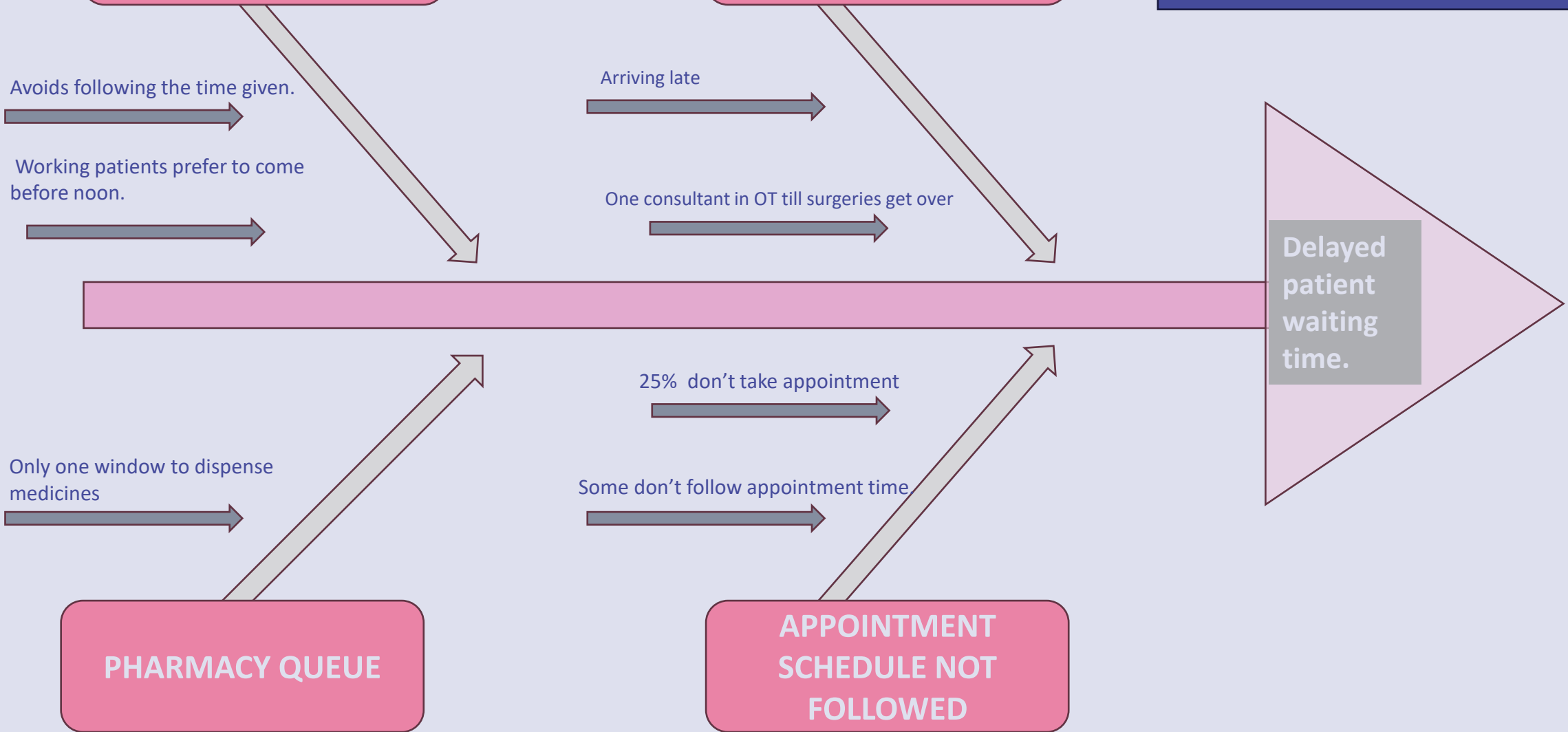
Only one window to dispense
medicines

PHARMACY QUEUE

25% don't take appointment

Some don't follow appointment time

**APPOINTMENT
SCHEDULE NOT
FOLLOWED**





ROOT CAUSE ANALYSIS	CORRECTIVE ACTION	PREVENTIVE ACTION
1. Doctor's unavailability 2.Appointment schedule not followed. 3. Patients travelling from a distance. 4. Queue at pharmacy.	1. Request the availability of doctors at 9:00am. 2. Request the patients to follow the given time. 3. Educate the patients regarding waiting time. 4. To manage the queue by collecting the prescriptions and letting patients sit and wait for their turn.	1. Inform the doctors about appointments in advance. 2. Aim to give appointments to 100% of the patients and ANC appointments should be given post lunch. 3.Utilization of consultants- one junior doctor for scans and two for consultations and OT. 4. To pre-prepare certain medicine kits that are particularly required.



Overall Observation :

➤ Things that are going well :

- The staff is well coordinated amongst themselves and dedicated towards their work.
- Co-operative and understanding within each other as well as with the patients.
- The work culture is very positive as various sorts of celebrations are done to keep the centre lively and positive.
- Patients leave the center with a smile and satisfaction.

➤ Things that can be done better :

- To engage the patients in their waiting time, newspapers, magazines and health articles along with FAQs can be provided.
- Video displayed on the TV can show – Success rates, other center pictures, interviews of doctors, other graphical presentations related to Infertility.
- Along with targeting the camp patients, health lectures can be given to the professionals working in various corporates, which will help create awareness of the brand. Might create special packages for them too.
- Most patients come for Dr. Lipsa, so instead of relying on her, Birla IVF should work on branding themselves better so that the patients come in the name of the company rather than just the doctor.
- Doctor slots to be blocked on the system regularly.



THANK YOU